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This treatment, which after all was being done on the lines of higher fever therapy by mechanical means, was promising and he hoped that in the future it would be possible to treat a larger series of cases by this method.

VIII BOOK REVIEWS

COMMON SKIN DISEASES. By A. C. Roxburgh, M.A., M.D.(Cantab), F.R.C.P. Sixth Edition. London: 1941. Messrs. H. K. Lewis & Co. Ltd., pp. 448 with 179 illustrations and 8 plates in colour. Price, 16s. net.

THE appearance of this new edition within two years indicates the popularity of the work, which offers a reasonable introduction to the more common diseases of the skin. Both the text and the index have been enlarged and the sections on treatment have been expanded in the light of recent progress. Dermatomyositis and Thorium X are considered in this new edition and the chapters on avitaminoses, impetigo, scabies and monilia infections have been rewritten and enlarged.

The text has been revised throughout and several minor modifications have been made. Treatment continues to be considered on conservative lines and dietary restrictions and internal remedies are not greatly favoured; Sulphonamide drugs are given credit for a certain limited therapeutic value. Reference is made to the use of the new emulsifying bases in dermatology, but a more detailed consideration would have been widely appreciated in view of the important advance in local treatment which they represent.

The wide incidence of scabies has been recognised and the chapter on this subject has been rewritten and much expanded; a clear description of the treatment is given and timely attention is drawn to the importance of the preliminary bathing and to terminal disinfestation. The choice of remedy is wisely shown to be of secondary importance, but a review of the newer as well as the time-honoured remedies is included.

A most valuable section of the book is the excellent Index of Preliminary Diagnoses which is retained; this indicates the sections of the text to which reference should be made in arriving at a probable diagnosis in a difficult case, while the supporting illustrations are of a high standard so that the volume will continue to be of considerable value to students and practitioners alike.

D. E.

CONGENITAL SYPHILIS. By Charles C. Dennie, B.S., M.D., and Sidney F. Pakula, B.S., M.D. With 133 engravings. Octavo, pp. 596. Published by Lea and Febiger, Philadelphia. Price \$8.00, net.

EDITORS of scientific journals and reviewers, on reading monographs submitted to them for publication or review, must often wish that every

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author, before finally despatching his work, would catechise himself on something like the following lines: "Have you written this monograph in such a way as to convey your knowledge and views to the reader concisely and intelligibly? Is the arrangement logical; are the foundation stones at the bottom of the building and the coping stones at the top, or are there places where the reverse obtains? Does this monograph contain the latest knowledge on the subject, and have you interpreted and quoted the work of other authors correctly and fairly; are the references correct? Is there any ambiguity in your views, are they supported by observed facts and are they logical deductions from the facts presented, or is there any other explanation of the latter? Are the statistics presented clearly, and are the inferences you have drawn from them sound in the light of correct statistical methods?"

Judged by these criteria, this book leaves much to be desired; it is a work in which a practitioner would not easily and quickly discover safe guidance in many of the difficult problems presented by congenital syphilis.

The general arrangement is indicated by the headings of the chapters following the Introduction: I, The Examination of the Congenital Syphilitic Infant; II, Serological Reactions and their Significance; III, Syphilis of Pregnancy; IV, The Cutaneous Manifestations of the Congenital Syphilitic; V, Eye Changes in the Congenital Syphilitic; VI, Congenital Syphilis of the Bones and Joints; VII, Congenital Neuro-syphilis; VIII, Congenital Syphilis of the Auditory Apparatus; IX, Syphilis of the Gastro-intestinal Tract; X, Syphilis of the Respiratory Organs; XI, Cardiovascular Syphilis; XII, Congenital Syphilitic Disease of the Liver and Spleen; XIII, Congenital Syphilis of the Kidney; XIV, Syphilis of the Endocrine System; XV, Latent Congenital Syphilis; XVI, The Adult Congenital Syphilitic; XVII, Syphilis of the Third Generation; XVIII, Congenital Syphilitic Twins; XIX, The Treatment of the Congenital Syphilitic; XX, The Differential Diagnosis between Congenital and Acquired Syphilis in Infants and Children.

The Introduction, of 10 pages, contains a little of the history of congenital syphilis, a little in a general sort of way about the incidence of this form of the disease, and, ominous of the spate of dogmatic opinion to follow, the following statement: "I have no doubt that the accidental discovery of the presence of syphilis during a routine examination, in the young or middle-aged, who deny any infection, is due to congenital disease. I do not make this statement from impressions but from facts."

In the first chapter, on routine examination, a recital, on two pages, of about 120 signs to look for in infants, children and parents is followed by two short paragraphs on the value of dark-ground illumination and of silver impregnation of tissues in diagnosis. In a complete guide to diagnosis one would expect to see technical details of the use of these methods, including the taking of specimens, their preparation for examination and the diagnostic appearances. Even if all the microscopical examination is relegated to the laboratory, the latter cannot help a practitioner who does not know how to take a specimen, and it is reasonable to expect the necessary instruction in a book of this size.

The paragraph on silver impregnation is followed by a few pages on stigmata which are stated (p. 29) to be "due to lack of or ill-development of particular parts of the anatomy that had their inception in the fetus." For this reason, the authors say: "interstitial keratitis, deafness, saber shins, outflung elbows, palatal perforation, Parrot's nodes, enlarged viscera, Clutton's joints, etc., which are nearly always due to syphilitic disease, cannot be included under stigmata because their formation was due to either activity of the spirochæta or their toxins, and not to the influence of maternal or fetal disease." When the reader has fathomed

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the meaning of this he may perhaps wonder how it reconciles with the following on the preceding page: "I consider the enlarged vein of the head as a stigma of syphilis. Treatment will reduce this vein to its normal size, if its size is due to syphilitic disease." On p. 397 it is stated that the enlargement is probably due to inflammatory changes in the middle coat, so that it seems a little difficult to distinguish it essentially from the other conditions due to the activity of *S. pallida* which the authors rule out from the stigma class. This chapter concludes with five pages on dental changes and some good illustrations.

The second chapter, though headed merely "Serological Reactions and their Significance," includes sections on the pathology of syphilis, "The Allergic Aspects of Syphilis" and "The Immunological Aspects of Syphilis" which are sandwiched between serological reactions and a section headed "Seroresistant Cases (Wassermann Fastness)," and this is followed by a section headed "The Influence of Geographical Location upon the Immunological Aspects of Syphilis." It would not be surprising therefore to find the seeker after truth in this chapter wishing that its authors would be a little more systematic in their presentation of the subject. The information on the interpretation of serum reactions is misleading. When the reader has waded through the text and found little or no guidance he may turn to Table I, in which are set out certain combinations of reactions with the Wassermann, Kahn or Kline, and Hinton tests and their interpretation. If he decides his line of action as a result of guidance by this table, he will label as syphilitic a great number of newborn, non-syphilitic infants whose blood reactions are positive. Nothing is said about the behaviour of these blood sera under quantitative titration of the reaction from week to week, and the only warning here of the possibility of the reactions being merely a mirror of the state of the mother's blood is in a section on "The Cord Wassermann Reaction," in which we are told that if the cord blood is positive it should be checked up by a test of the venous blood. The authors then say: "If it checks and one can rule out syphilotoxæmia, then the infant has syphilis." In this chapter, which is presumably to guide the reader in the interpretation of the serum reactions of an infant's blood, it would seem natural to expect the authors to tell us what is syphilotoxæmia and on what conditions one may interpret the syphilitic reactions of an infant's blood as due to syphilis. But the authors had different views. Apparently they came to the conclusion that the reader should not have his curiosity on this important question satisfied just yet; he must work his way through many pages on immunology and pathology to Chapter II, which is headed "Syphilis of Pregnancy," and there after he has read the authors' views on the manner of infection of the mother and of the entry of *S. pallida* into the embryo, on the influence of pregnancy on the course of syphilis in the mother and the influence of the female sex hormone on the course of syphilis, 46 pages after the discussion on the Wassermann reaction of the cord blood, some way past the chapter of serological reactions and their significance, he will discover the definition of "syphilotoxæmia" and will get his instructions on the action to be taken in the presence of various serum reactions. "Syphilotoxæmia" is defined as "that type of positive serological reaction in either the cord or corporeal blood, or both, which spontaneously disappears in a few days or weeks." But why infer that Wassermann reagin is a toxin? The instruction as to the line of action to be taken is (p. 84): "Any repeated positive serological reaction in the new born infant which lasts more than three weeks should be regarded as positive evidence of syphilis, regardless of the lack of proof of material concerning paternal or familial syphilis. A negative history of syphilis should likewise be discarded." This advice, which the reader of this review may be assured has been copied faithfully from the book, is supplemented by the following,

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4 pages later: "If an infant's blood, either cord or corporeal, shows definite positive serological reactions and the child is the issue of a known syphilitic mother, who has been adequately treated, inadequately treated, or had [*sic*] had no treatment, the child should be adequately treated for congenital syphilis." Such instructions disregard the evidence that the serum reactions may take many weeks to die out from the blood of an infant who is amply proved to be non-syphilitic; they generate the cordial hope that the authors' views on this important question of treatment or no treatment of the syphilitic mother's infant will not gain any ground in this country.

The occurrence of positive serum reactions in non-syphilitic pathological states cannot properly be dismissed so lightly as is done on p. 41. The effect of infectious mononucleosis and of vaccination alone on the serum reactions justify a more careful account if the practitioner is to be guided properly by his study of a work on this subject.

The section in Chapter II on the pathology of syphilis starts with this amazing statement: "Schaudinn and Hoffmann, in 1905, demonstrated an organism found in the secondary skin lesion, which they believed to be the cause of syphilis, but it was not until the time of Noguchi that this was proved to be a fact. It was he who was able to cultivate the organisms *in vitro*, after he had produced the typical primary lesion of syphilis in the testicle of the rabbit from the primary lesion of man." Considerations of space limit much further comment on the authors' account of the pathology of syphilis beyond remarking on its inadequacy. There is no orderly account of the histological appearances or indication of the time factors in invasion of the body by the spirochætes. The third stage is said (p. 47) to be one "in which the organisms of syphilis are beginning to be overcome by cellular elements, so that they are destroyed or drift away." Drift away? Whither, please?

Discussing sero-resistant cases, the authors say: "At least a high percentage of them will, as age advances, develop negative serological reactions of their own accord and with no evidence of the syphilis, excepting the persistent positive Wassermann reaction. One is safe in assuming that the patient, under proper care and observation, will not develop serious sequelæ in after life, excepting that his expectancy is reduced by the fact that he has congenital syphilis."

The following case is stated (p. 75) to refute "two arguments: (1) That the father is not infectious after adequate treatment, and (2) that syphilis is not usually infective after the fifth year." The father had 18 doses of neoarsphenamine and 72 *intravenous* injections of mercury in 1920, 1921 and 1922, the treatment having been started a year after infection. He married in 1923, *i.e.*, be it noted, less than 5 years after infection, and in 1939 his wife and 3 children were found to have syphilis. The authors say (p. 76) that this is a case in which a father transmitted the disease to his entire family in spite of age incidence and "in spite of fairly adequate treatment." Readers will have their own views on the adequacy or otherwise of a treatment amounting to no more than 9 and possibly 6 injections of neoarsphenamine with not more than 36 and possibly only 24 *intravenous* injections of mercury a year. They may also question the scientific value of evidence in which the state of the wife's blood at marriage was unknown. The authors say that this is an example of a man infecting his whole family. Assuming that he did infect his wife, it appears to be evidence of two well-known facts, (1) that irregular treatment, on such lines as this must have been, prolongs the infectiousness of syphilis, and (2) that there is no limit, within the child-bearing period, to the length of time that a woman be liable to transmit syphilis to her offspring.

The authors seem to believe that the embryo is infected before the fifth month in spite of the evidence that *S. pallida* has rarely been found in the

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embryo before that time, in spite of the observation that it is in the casting off of viable foetus that syphilis shows its effect in the premature ending of pregnancy, and in spite of the enormous difference between the results of treatment started before the fifth month and those of treatment started in the second half of pregnancy. Then they make the following statement (p. 80): "One must not forget that the toxæmia of syphilis in the mother may also have a profound influence upon the child. This is particularly well noted in syphilis of the bones of the newborn infant, which is different from syphilis of all other types . . ." It would be interesting to know the nature of this toxin. Who has isolated it and what effect has it been observed to have on animal tissue?

These examples have been given in some detail as better evidence of the quality of the matter in this book than would be the reviewer's own opinions. They leave little space for criticism of the remaining portions of the book. It is necessary to comment that in the descriptions of the use of radiographic methods in diagnosis recent work showing the pitfalls in such examinations and the appearances in the foetal bone ends of bismuth deposits resulting from administration of this remedy to the mother are not mentioned; it is noteworthy that the date of the last reference in the bibliography on this important subject is 1931.

The chapter on treatment of congenital syphilis starts with directions for taking the history of the parents and for examination of the child both before and during the treatment and then proceeds to the technique of intravenous injection before any instruction has been given on the remedies to be used or their preparation for administration. This might be thought to be a suitable place for description of the technique of sterilisation of instruments, but the authors do not seem to have thought of this until some 90 pages later where they say that they should be boiled in triple distilled water. This is in discussing nitritoid crises. A number of causes of the latter side-effect are given, but the two most important ones, idiosyncrasy and speed of injection, are not mentioned either here or under the technique of injection. In the treatment of the nitritoid crisis the *intravenous* injection of 1 c.c. of a 1 in 10,000 solution of adrenaline chloride is advised and without any qualification as to the speed of the injection of this powerful, violent and by no means fool-proof remedy, or as to the age and weight of the patient.

For hæmorrhagic encephalopathy the authors say that lumbar puncture is contra-indicated because the withdrawal of the fluid often causes more oedema of the brain and more hæmorrhage into the tissues. The authority for this statement is not given.

A number of the references to the literature disclose extraordinary carelessness. Of those which may particularly interest readers in this country, the reference to Mr. Eardley Holland's important report on "The Causation of Fœtal Death," which incidentally deserved to be consulted in the original rather than through an abstract, appears in the bibliography under the heading, "Holland, Eaderly." But a more atrocious error is in the reference to D'Arcy Power. On p. 246, in a paragraph on Clutton's joints is stated: "In the D'Arcy system of medicine the fact is stated that the histological examination of material from some of his cases showed a gummatous formation." On the following page appears: "Power D'Arcy described the histological picture as being one in which the membranes were swollen and contained minute gummata." In the bibliography there is no reference headed "D'Arcy," so one must conclude that both the above are references to the work which is mentioned in the bibliography—"A System of Syphilis in Six Volumes" edited by D'Arcy Power and J. Keogh Murphy.

The authors do not seem to have been able to make up their minds what to call the organism of syphilis, as may be judged by the following examples:

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" The Spirochæta pallida," " the spirochætæ pallidæ," " the treponemata," " the spirochæta," " treponemas," " the treponemata gains entrance," and in the next paragraph on p. 72, " The spirochæta has not been demonstrated on the inside of any cell," whatever this may mean ; on p. 74 we have " infection with treponemata cuniculi was confused with infection due to treponemata pallidum." Perhaps the authors would retort to this criticism, " What does it matter ? Everybody knows what we mean." Well ! Most of us like our intellectual food served up as elegantly as circumstances will permit.

L. W. H.